

PERMISSION SLIP FOR ADULT VOLUNTEER PARTICIPATION IN DRILL OR EXERCISE

I (Name): _____ give my permission to
participate in the (County) _____ drill or exercise.

I understand that all reasonable and prudent precautions will be taken to ensure no harm
or injury comes to me by the drill participants.

My emergency contacts are:

Name: _____ Phone: _____
Name: _____ Phone: _____

I am allergic to the following medications and or substances:

I hereby covenant and agree to release and hold harmless the County from and against
any and all liability, loss, damages, claims, or actions for bodily injury and/or property
damage, to the extent permissible by law, arising out of participation in the drill or
exercise.

Signature

Date: _____